

United States Bankruptcy Court Northern District of Illinois, Western Division		Voluntary Petition																		
Name of Debtor (if individual, enter Last, First, Middle): Gallagher, Patrick M.		Name of Joint Debtor (Spouse) (Last, First, Middle): Gallagher, Elaine M.																		
All Other Names used by the Debtor in the last 6 years (include married, maiden, and trade names): None		All Other Names used by the Joint Debtor in the last 6 years (include married, maiden, and trade names): None																		
Last four digits of Soc.Sec.No./Complete EIN or other Tax ID No. (if more than one, state all): 7195		Last four digits of Soc.Sec.No./Complete EIN or other Tax ID No. (if more than one, state all): 1803																		
Street Address of Debtor (No. & Street, City, State & Zip Code): 4518 E. Wonder Lake Drive Wonder Lake, IL 60097		Street Address of Joint Debtor (No. & Street, City, State & Zip Code): 4518 E. Wonder Lake Drive Wonder Lake, IL 60097																		
County of Residence or of the Principal Place of Business: Mchenry		County of Residence or of the Principal Place of Business: Mchenry																		
Mailing Address of Debtor (if different from street address):		Mailing Address of Joint Debtor (if different from street address):																		
Location of Principal Assets of Business Debtor (if different from street address):																				
Information Regarding the Debtor (Check the Applicable Boxes)																				
<p>Venue (Check any applicable box)</p> <p><input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.</p> <p><input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.</p>																				
<p>Type of Debtor (Check all boxes that apply)</p> <p><input checked="" type="checkbox"/> Individual(s) <input type="checkbox"/> Railroad <input type="checkbox"/> Corporation <input type="checkbox"/> Stockbroker <input type="checkbox"/> Partnership <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Other _____ <input type="checkbox"/> Clearing Bank</p>		<p>Chapter or Section of Bankruptcy Code Under Which the Petition is Filed (Check one box)</p> <p><input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 11 <input checked="" type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 12 <input type="checkbox"/></p>																		
<p>Nature of Debts (Check one box)</p> <p><input checked="" type="checkbox"/> Consumer/Non-Business <input type="checkbox"/> Business</p>		<p>Filing Fee (Check one box)</p> <p><input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (Applicable to individuals only) <input type="checkbox"/> Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form No. 3.</p>																		
<p>Chapter 11 Small Business (Check all boxes that apply)</p> <p><input type="checkbox"/> Debtor is a small business as defined in 11 U.S.C. § 101 <input type="checkbox"/> Debtor is and elects to be considered a small business under 11 U.S.C. § 1121(e) (Optional)</p>																				
<p>Statistical/Administrative Information (Estimates only)</p> <p><input checked="" type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.</p>		THIS SPACE IS FOR COURT USE ONLY																		
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">Estimated Number of Creditors</td> <td style="width: 10%;">1-15</td> <td style="width: 10%;">16-49</td> <td style="width: 10%;">50-99</td> <td style="width: 10%;">100-199</td> <td style="width: 10%;">200-999</td> <td style="width: 10%;">1000-over</td> </tr> <tr> <td></td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>		Estimated Number of Creditors	1-15	16-49	50-99	100-199	200-999	1000-over		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
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Voluntary Petition <i>(This page must be completed and filed in every case)</i>		Document	Name of Debtor(s): Patrick M Gallagher & Elaine M Gallagher	
Location Where Filed: Rockford, IL	Prior Bankruptcy Case Filed Within Last 6 Years (If more than one, attach additional sheet)		Case Number: 03 B 74000	Date Filed: 07/29/2003
Name of Debtor: NONE	Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor (If more than one, attach additional sheet)		Case Number:	Date Filed:
District:	Relationship:	Judge:		
Signature(s) of Debtor(s) (Individual/Joint)		Signatures		
<p>I declare under penalty of perjury that the information provided in this petition is true and correct.</p> <p>[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.</p> <p>I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p>				
<input checked="" type="checkbox"/> /s/ Patrick M Gallagher Signature of Debtor		Exhibit A (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11)		
<input checked="" type="checkbox"/> /s/ Elaine M Gallagher Signature of Joint Debtor		<input type="checkbox"/> Exhibit A is attached and made a part of this petition.		
Telephone Number (If not represented by attorney)		Exhibit B (To be completed if debtor is an individual whose debts are primarily consumer debts)		
Date		I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter.		
Signature of Attorney <input checked="" type="checkbox"/> /s/ Richard T. Jones Signature of Attorney for Debtor(s)		<input type="checkbox"/> /s/ Richard T. Jones Signature of Attorney for Debtor(s) Date		
RICHARD T. JONES 6184629 Printed Name of Attorney for Debtor(s)		Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?		
Firm Name <u>138 Cass Street</u> Address <u>Post Office Box 1693 Woodstock, Illinois 60098</u> <u>(815) 334-8220</u> Telephone Number		<input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No		
Signature of Debtor (Corporation/Partnership) I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.		Signature of Non-Attorney Petition Preparer I certify that I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110, that I prepared this document for compensation, and that I have provided the debtor with a copy of this document.		
The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.		Printed Name of Bankruptcy Petition Preparer		
<input checked="" type="checkbox"/> Signature of Authorized Individual		Social Security Number (Required by 11 U.S.C. § 110(c).)		
Printed Name of Authorized Individual		Address		
Title of Authorized Individual		Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document:		
Date		If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.		
<input checked="" type="checkbox"/> Signature of Bankruptcy Petition Preparer		Date		
Printed Name of Bankruptcy Petition Preparer		A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.		
Title of Bankruptcy Petition Preparer		Date		
Date		A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.		

Chicago Tribune
Post Office Box 6315
Chicago, Illinois 60680

Citifinancial
2038 N. Richmond Rd.
McHenry, IL 60050

Citifinancial Mortgage
Post Office Box 9023
Des Moines, Iowa 50368-9023

ComCast
2508 West Route 120
McHenry, Illinois 60050

Daniel Sozinovich, MD
13707 N. Jackson Street
Woodstock, IL 60098

Gentiva Carecentrix
c/o OSI Collection Services
Post Office Bxo 3900
Lakeland, FL 33802

Gentiva Carecentrix, Inc.
Post Office Box 538059
Atlanta, GA 30353-8059

Household Automotive Fin.
c/o Sherman Acquisition
726 Exchange Street, #700
Buffalo, NY 14210

Household Automotive Finance
Post Office Box 17904
San Diego, CA 92177

Irfan Hafiz, MD
500 E. Ogden Ave., #V
Hinsdale, IL 60521

James Skopec, MD
1110 N. Green Street
McHenry, IL 60050

Lake/McHenry Pathology Assoc.
520 East 22nd Street
Lombard, Illinois 60148

Marengo Disposal
1050 Green Lee Street
Marengo, Illinois 60152

Marengo Disposal
c/o Frank M. Bonifacis, Attorney
Box 673043
Milwaukee, WI 53267-3043

McHenry Radiologist
Post Office Box 71073
Chicago, Illinois 60694

McHenry Radiology & Imaging
Post Office Box 220
McHenry, Illinois 60050

MCI
Bankruptcy Department
3470 Rider Trails
Earth City, MO 63045

MCI
c/o NCO Financial
Post Office Box 41417, Dept. 99
Philadelphia, PA 19101

Merchants Credit Guide
223 W. Jackson Blvd.
Chicago, IL 60606

Metor Infectious Dis. Consultants
600 E. Ogden, #C
Hinsdale, IL 60521-2480

MKM Acquisitions
245 8th Ave., PMB 272
New York, NY 10011

Moraine Emergency Physicians
Post Office Box 8759
Philadelphia, PA 19101-8759

Northern IL Medical Center
c/o OSI Collection Services, Inc
1375 E. Woodfied Rd., #110
Schaumburg, IL 60173-5447

Northern IL Medical Center
Post Office Box 1447
Woodstock, Illinois 60098

Northwest Physical Therapy
4680 Saganaw Street
Lake in the Hills, IL 60156

Onyx Waste
c/o D & B RMS
55 Shuman Rd., Box 482
Richfield, OH 44286

Orchard Bank
Post Office Box 17051
Baltimore, MD 21297-1051

Pellettieri & Assoc.
991 Oak Creek Drive
Lombard, IL 60148

Relter Chiropractic
5415 W. Bull Valley Road
McHenry, IL 60050

Sears National Bank
Post Office Box 182149
Coloumbus, Ohio 43218-2149

Tiger Financial Services
309 W. Washington Street
Chicago, IL 60606

Van Weelden Disposal, Inc.
Post Office Box 1215
Crystal Lake, IL 60039

Waste Management North
22333 W. Highway 173
Antioch, IL 60002

Waste Management North
c/o D & B RMS
4836 Brecksville Rd.
Richfield, OH 44286

Wells Fargo Home Mortgage
Bankruptcy Department
3476 State View Blvd.
Fort Mill, South Carolina 29715

Wilmot Medical Assoc.
3920 Wilmot Rd.
McHenry, IL 60050-2120

**UNITED STATES BANKRUPTCY COURT
Northern District of Illinois, Western Division**

In re Patrick M Gallagher & Elaine M Gallagher,
Debtor Case No. _____
Chapter 13 _____

VERIFICATION OF LIST OF CREDITORS

I hereby certify under penalty of perjury that the attached List of Creditors which consists of 2 pages, is true, correct and complete to the best of my knowledge.

Date _____	Signature of Debtor	/s/ Patrick M Gallagher PATRICK M GALLAGHER
Date _____	Signature of Joint Debtor	/s/ Elaine M Gallagher ELAINE M GALLAGHER

United States Bankruptcy Court
Northern District of Illinois, Western Division

In re Patrick M Gallagher & Elaine M Gallagher

Case No. _____

Chapter 13

Debtor(s)

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept \$ 2,700.00

Prior to the filing of this statement I have received \$ 500.00

Balance Due \$ 2,200.00

2. The source of compensation paid to me was:

Debtor Other (specify) _____

3. The source of compensation to be paid to me is:

Debtor Other (specify) _____

4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in the bankruptcy proceeding.

/s/ Richard T. Jones

Date

Signature of Attorney

Name of law firm